## CIVILIAN POSITION NEEDS

- 1. Forward completed original plus 1 copy to the Position Management Committee via Head, Civilian Personnel Division
- 2. A separate request is required for each position desired.
- If space is insufficient in any block, continue on plain paper identified by block number.
- 4. You will be notified of final action by the Chairman, Position Management Committee

	From (Department Head)	Date				
2.	Type of Action DATE EMPLOYEE	PRIORITY				
	New position REQUIRED	(	(Circle one)			
•	Upgrade Other Changes	Emergency	Urgent Desired			
	Perm Temp FT PT	If Temp What Duration	If Part Time, # of Hrs. per pay perio			
3.	Proposed title, grade, series. You position description.	must attach a dr	aft of the proposed			
4 .	Name, title and grade of immediate s	supervisor of the	position			
5.	Who presently performs these duties?	)				
5.	What new requirements-increase in wo for this position/upgrade?	orkload, etc., has	s caused the need			
6.	What new requirements-increase in wo for this position/upgrade?  What new equipment and/or increased this position? (New position only)					

INSUFFICIENT DOCUMENTATION WILL BE CAUSE FOR RETURNING THIS REQUEST

Name, Rank/Title of Approval Signature of Approval Authority Diauthority (Directorate)  Comments  ACTION BY POSITION MANAGEMENT COMMITTEE Date Received Date Action:  Commanding Officer  Commanding Officer  Chairman, Position Management Committee Date  Chairman's Signature  Chairman's Signature  From: Commanding Officer  Chairman, Position Management Committee  Chairman, Position Management Committee  Chairman, Position Management Committee  Returned approved/disapproved.  Vou are directed to take appropriate action and notify requestor of action.	Name,	Rank/Title of	Requestor	Sig	nature of	Requestor		Date
Comments  Comments  ACTION BY POSITION MANAGEMENT COMMITTEE Date Received Date Action:  Chairman, Position Management Committee Date  Commanding Officer  Chairman's Signature  Chairman, Position Management Committee  Chairman's Signature  Chairman, Position Management Committee  Chairman's Signature  Chairman, Position Management Committee  Chairman, Position Management Committee								
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rom: Chairman, Position Management Committee  o: Commanding Officer  . Forwarded, recommending approval/disapproval.  Chairman's Signature  rom: Commanding Officer  o: Chairman, Position Management Committee  . Returned approved/disapproved.  . You are directed to take appropriate action and notify requestor of ction.								
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Commanding Officer  Chairman's Signature  Chairman, Position Management Committee  Returned approved/disapproved.  You are directed to take appropriate action and notify requestor of ction.	CTION	BY POSITION	MANAGEMENT C	COMMITTEE	Date Red	ceived	Date	Action
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Commanding Officer's Signature	ction	•						
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